

## Spouse Badge Request Form

Name of person requesting badge: \_\_\_\_\_

Are you a current federal employee? (Circle one) Yes No

Phone # you can be reached at: \_\_\_\_\_

Email you can be reached at: \_\_\_\_\_

Name of spouse: \_\_\_\_\_

Date of Birth of the spouse: \_\_\_\_\_

Please provide an explanation on why a Spouse badge is needed below:

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**\*Once complete please fax to 303-497-4709\***

Internal Use Only	
Date Rec'd: _____	Clear: Yes or No (If no provide data to the Chief)
Date entered: _____	
Date employee notified: _____	Date sent to the VC: _____
Approved: Yes or No (If no, state reason)	
_____	
_____	
_____	